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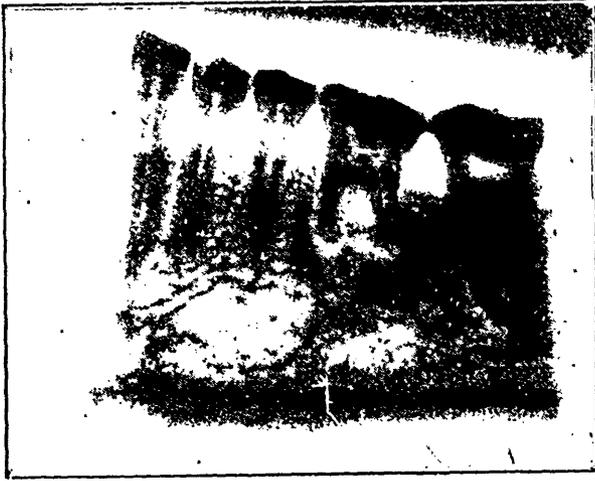
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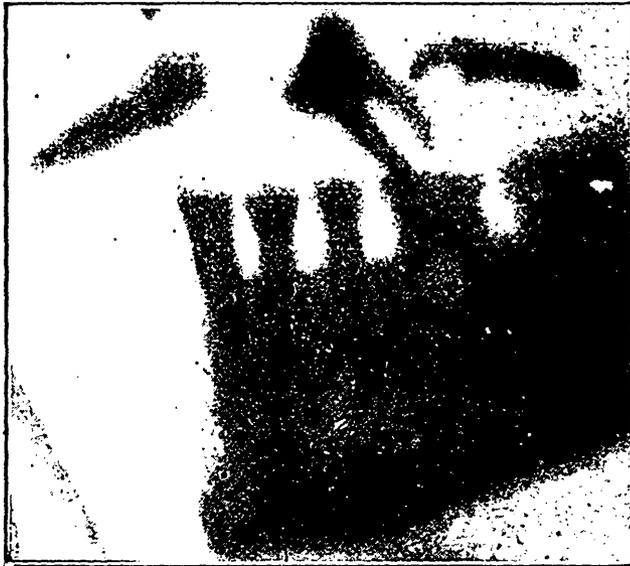
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A section of inferior maxillary bone with cuspid, two bicuspid and two molar teeth, showing the interior structure of the bone and alveolar process; also, a very clear production of the roots of the teeth as they are imbedded in the deep process, with the nerve canals and pulp chambers showing very distinctly. The two roots of the sixth-year molar have been amputated nearly one-third of their length, which fact is very perceptible in the picture.



Section of inferior maxillary and three extracted teeth. This shows the roots of the teeth imbedded in the process, and the pulp chambers and nerve canals, but not very clearly. Both photographs taken through the dense cardboard back of a plate holder belonging to a small camera. (See Dr. Blanchard's annual address.)

Dominion Dental Journal

VOL. VIII.

TORONTO, APRIL, 1896.

No. 4

Original Communications

THE VERMONT STATE DENTAL SOCIETY.*

By E. O. BLANCHARD, D.D.S.

Mr. President, Ladies, Gentlemen, of the Dental Association of the Province of Quebec—through whose courtesy and generous hospitality we now find ourselves in this beautiful city—Members of the Vermont and New Hampshire State Dental Societies, and any visitors who may chance to be present,—In my official capacity I bid you all a hearty and friendly welcome.

We have assembled here, an agreeable commingling of different nationalities, states, and societies, and this occasion seems beautifully typical of the *oneness* of our professional, ethical and sympathetic ties ; with pleasure do I now greet you all as friends, brothers and co-laborers.

As dental practitioners, we meet here to-day, members of one family, with common interests, mutual respect and unity of hopes and aspirations. In addressing myself to *you*, brothers of the dental profession, I assume that each one of you in choosing the profession of Dental Science considers that you have found the work best adapted to your natural abilities, that which will give you the most complete mental development and best assist you in making the most of your energies and capacities. Let us, at least, hope and believe so, for without confidence in ourselves and faith in our work, success is always uncertain.

There never was a time in the world's history when success in any profession or calling was more dependent upon earnest, per-

* President's Annual Address to the Vermont State Dental Society.

sistent labor and effort than now. Especially is this true of our own profession, for it is highly essential that a D.D.S., be well versed in medical science, he must be a skilful surgeon, something of a metallurgist, should have a practical understanding of chemistry, must excel as a mechanic of quick inventive faculties, besides possessing some knowledge of a great variety of high-sounding -ists, -isms, and -ologies.

The old-time "all-'round" physician, who very complacently and sedately treated both man and beast for all the various ills "that flesh is heir to," now exists only as a sort of "survival" in certain rural districts. He was a marvellous character, however, a conspicuous and striking figure in the mellow vista of the past, whose advice was sought in a great variety of matters, and whose rude and rusty turnkey was as great a source of awe and terror as was his primitive, portable drug store. His place is filled to-day by a number of "*specialists*," who have learned that life is none too long for the most brilliant intellects to properly study one particular portion of the human organism. Thus it is, also, with the *legal* profession, whose members once endeavored to grasp the entire realm of jurisprudence, but who now largely confine themselves to one particular branch of practice. In fact, nearly *all* professions and trades are rapidly becoming divided into specialties.

The constantly increasing activities of our time have continually tended to force men into special paths; therefore, success now largely depends thereon. The changes so rapidly effected in college management, in schemes of study, and student life, in the methods of inculcation and application of ideas, have registered a corresponding change in the thought and life of the entire country. Enormous increase of wealth, specialization of occupation, expansion of experience, multiplication of resources, comfortable environments and luxurious habits, have notably characterized the history of the past few decades.

Our profession has shared in all these tendencies; meanwhile, its progress has been phenomenal. The advanced position which we occupy *to-day*, however, was not effected by any one person, not set of persons. It is the accumulation of innumerable choice morsels from an army of earnest workers; therefore, we must not falter, but let us inscribe on our banner progression as our watchword, and with the battle-cry of truth and honor march steadfastly on.

It has been said, "No profession offers better opportunities for spreading the *truth* than dentistry." Let us never lose sight of this fact. It matters little which title we have earned at our various colleges, whether it be D.D.S., L.D.S., or D.M.D.; we all sail under the same flag, and are known by all as "doctors"—which, as derived from the Latin, signifies teachers, instructors.

Now, are we doing our duties as teachers? Are we properly instructing those who seek our advice and assistance? Are we as dentists educators *par excellence* of the people? I fear we have not always fully measured our influence in the community. How many of us clearly realize that good or bad dentistry exerts a corresponding influence on the morals of our patrons? Some profound philosopher has drawn a comparison between the benefits derived from friction matches and Sabbath Schools, somewhat in favor of the matches, on account of the many annoyances and trials of temper which are saved in the kindling of fires and a consequent saving in the use of large and wicked expletives. Doubtless a similar claim might be made for good, faithful dental work, as perhaps nothing is responsible for more sins of this nature than painful teeth and bad fitting dentures.

It is my sincere belief that the people can and should be assisted and educated in the natural laws of dentistry by professional advice on all proper occasions, both in and out of the office. Especially should we endeavor to instruct parents regarding the development and care of children's teeth. *Such* information will rapidly spread, going from one person to another, until at length we have a people well informed in this regard—an intelligent community who comprehend both the value of good natural dentitions and the proper care of them. They should also understand the necessity of skilful and practical dentistry, and learn to look upon the dentist as a faithful and reliable guide. People usually gauge their opinions of us by the satisfaction which our professional service gives, and they are largely influenced, also, by the impressions which neatness of person, bright, well-kept offices and our moral characters as well, may produce.

Are we capable of meeting these three requirements, and satisfactorily passing under the scrutinizing eye of an exacting and criticising public? Deficiency in any one of them tends to limit the circumference of our field of action and accordingly our influence for good. Are we as a profession duly impressed with the importance of thoroughness and excellence in our work? Have we as sharp an eye to durability as the Irishman who built a wall three feet high and four feet wide in order that, as he declared, if it chanced to be blown over it would then be higher than it was before?

Many practitioners strive to found a reputation from the durability of their work, and doubtless it forms an excellent foundation, but it is only a foundation, the other two requisites mentioned being essential to a complete structure. Refined and sensitive people cannot be expected to willingly patronize a professional man who is untidy and unattractive in person, and whose office is more suggestive of a blacksmith shop than of civilized apartments.

It is, also, an opinion of my own—and consequently there is nothing compulsory about its acceptance—that no dentist can do nice, thorough and intricate work while his rooms, instruments and tools are in such a state of disorder and confusion as to be far more conducive to insanity than to delicate manipulation.

Even children are observant of our appearance and habits. You may have heard of the small boy—one of the irrepressible sort—who refused to submit to the extracting of the second tooth unless assured that new instruments would be used that “hadn't been in everybody's mouth;” and when his parents endeavored to convince him that the dentist washed the forceps after use, much as the cook washes the knives and forks after meals, he declared that when his first tooth was extracted “the dentist only wiped them on an old rag and put them back in the case.”

The first few years of a dentist's professional life usually form a criterion of his future career, and if, with strict integrity and patience, he faithfully and firmly adheres to duty, regardless of dollars and cents, his reputation soon becomes assured. Later on the influx of dollars and cents will amply prove this theory. He should not allow his account book and ledger to tell of immediate financial success so much as his standing in the estimation of the community. As the painter or sculptor keeps continually before his imagination an exalted ideal, so let us in the practice of our own art, set our standard high.

Let us also remember that the value of a thing always corresponds with the actual cost. The kindly smile, the gentle word, the indication of sympathy for suffering, the delicate care in the performance of painful operations, apparently cost little; their real cost, however, is found in the previous cultivation of sunny spirits and humane dispositions.

The professional skill upon which depends our success or reputation may seem comparatively easy to a mere observer, for he does not reckon the years of patient effort, the diligent study and practice, or even the financial expense which this skill cost us. And we ourselves should expect no more from our profession than we are willing to put into it in the shape of thorough, serious, earnest mental and physical labor.

You have doubtless heard of the shoemaker who considered *his* work just as important as the minister's, and to illustrate, taking up a pair of boys' shoes, said: “That boy's body ought to be kept healthy, hadn't it? I am goin' to do my part; if he should catch cold some muddy day and get pneumonia or somethin' of the sort, his father would have a heavy doctor's bill to pay—and even then the boy might die. I can't afford to put poor work into that job. Too much depends on it. I propose to mend them shoes as though my salvation depended on't. I wouldn't like to meet that

boy up yonder and have him tell me he suffered and died because I wasn't a faithful shoemaker. I couldn't stand that nohow. Do you think a vocation is a humble one when it deals with the health and lives of our fellow-creatures? I reckon not."

Now, if the shoemaker's philosophy will *not compare* for elegance with that of Herbert Spencer, it is, nevertheless, good sound common-sense. And, something after his manner, I would ask what profession deals more directly with the health, happiness and welfare of its patrons than dentistry through its intimate connection with mastication, the digestive and nutritive functions, and hence, with the fundamental principles of life? If time would permit, a long lecture might be based on the how and why of these generalizations, showing that the physical welfare and accordingly the moral character of our patients largely depends on the thoroughness and conscientiousness with which we do our work.

A subject which is largely discussed at the present time in connection with our calling is hypnotism. It is known as magnetism, mesmerism, electrical psychology, black art, but all are embraced under suggestive therapeutics or hypnotism. That which surpasses human understanding during one generation may be plausibly and rationally explained by the next; or, that which is the subject of investigation only among scientific scholars to-day is likely to become a matter of common knowledge in the near future.

It is a natural propensity of the human mind to regard with nervous apprehension that which seems weird, incomprehensible and dangerous, yet tempting. Therefore, the sooner hypnotism is generally understood, the sooner will the danger and fear of its agency be overcome. It has been brought before the public and freely discussed from various standpoints; yet little has been learned regarding its relation to therapeutics—as an alleviating and healing agent—in which relation it doubtless has distinguished virtues. Nor does it seem to be commonly understood that a person cannot be hypnotized for the first time without his or her knowledge or consent. The notion that an individual may without premeditation be deprived of his will and made, all unconsciously, to do the will, good or evil, of another, is purely fictitious.

The imagination plays an important part in hypnotism. It is necessary for the subject to *imagine* that he may be hypnotized, also that the operator *can* hypnotize. To be overcome, the mind must be, so far as possible, *concentrated* upon his thought; while the forces of will or desire should remain passive. The dentist who employs hypnotism as a therapeutic and anæsthetic agent, must, first of all, rely upon the willingness, credulity and

passivity of the patient. It is true that a person who has been hypnotized once can be more easily influenced again, and this is largely owing to the absence of fear or anxiety; then the remembrance of the first experience and the subject's consciousness of the operator's powers renders the mind more susceptible to the influence.

Hypnotism has shown that we are possessed of a double consciousness, or more properly, perhaps, of two selves—a conscious self and an unconscious self—and while the conscious self is busy the other one is noting and registering the auditory impressions which fail to reach the conscious self. It is supposed that the unconscious self is continually existing in a suppressed state during the waking hours, and that it is this second personality which executes the post-hypnotic act. A little study and investigation in this direction will harm none of us and we may derive some benefit therefrom.

In the January number of the *Dental Cosmos*, we find an article by William James Morton, M.D., describing the guaiacol-cocain cataphoresis and local anæsthesia. His method as described, is one of the most recent contributions to dental science, and is exceedingly interesting to us, as it is not only applicable to the soft parts in extracting and other surgical operations, but it is equally useful in obtunding pain in the sensitive dentine and nerve pulp. He describes guaiacol as a solvent for hydrochlorate of cocain, which may be made to penetrate the tissues by aid of the electric current. The advantages to be derived from this are the production of a very pronounced local anæsthesia, strictly confined to the parts to which it is applied, and the prevention of any toxic effects, as its absorption into the system is extremely slow.

There are several articles in recent numbers of our journals describing this method, and I only allude to this briefly as something that impressed me as being of value in our operations, presuming, however, that most of you are as familiar with it as myself. But while speaking of anæsthetics, I beg your indulgence for once more alluding to the omnifarious sons of Erin. An Irishman was badly injured and taken to a hospital. His anxious wife called to see him, but was told by the nurse that she would have to call to-morrow, because he was under the influence of an anæsthetic. "Arrah, bekase he's unther the influence of Ann Anasthetic, is it? Faith an' begorra, oi *will* see him to-morrow; and if oi find him under the influence ov Miss Ann Anasthetic, I'll have a divorce immediatly, if oi have to sell the goat an' pig. So oi will."

Very recently I was so fortunate as to be the guest of Prof. E. B. Frost, of Dartmouth College, and to have the privilege of seeing and assisting in a few experiments with what is known as

X rays. The experiments were performed in the college laboratory and were most interesting. Of course, very little is yet understood concerning this peculiar phenomenon, as its title of X or unknown rays indicate, but those who have contemplated the results of what has been performed by the X rays predict that it is possible to develop and perfect the method now used as much as photography has heretofore been improved, and that it may be carried to as fine a point of excellence as have the microscope and telescope at the present day.

When this is accomplished it doubtless will prove of great value as an assistance in our branch of science, for if we could have a mouth mirror in which the object glass could be substituted by some plate covered with barium platino-cyanide (which, it is said, shows the shadows of the objects exposed to X rays), we could then use a Crooke's tube from the exterior, and by placing this mirror in the mouth be able to examine the roots of teeth for an abscess or pulp canal for pulp stones, or by this means discover any hidden approximal cavity, or, in fact, any other pathological condition.

One among the pictures taken while I was present, was that of some teeth, the exposure of which was made *through* an ordinary plate holder, sufficiently clear to show the nerve canals and pulp chambers in these teeth. I think this was the first experiment of this kind to show a cavity in the interior of a bone or tooth. This picture, and a few others, I have here and shall be glad to show them to you.

Now, gentlemen of the convention, that the greatest good may come to our profession, to our patrons and to ourselves, let us enter freely and earnestly into the discussion and exchange of our different views. Let us not fear to communicate new ideas, for by giving we gain. In attempting to explain our various theories our thoughts become clearer, our horizon broadened, and our efforts for others render us more unselfish and liberal. On this twentieth anniversary, let us renew our obligations to our society by giving it true and hearty support. The outlook for the coming year is full of encouragement. Assuredly we have a goodly past to review; and as dentists, as fellow-workers, as brothers with a common sympathy, and a common fellowship, a brighter future invites us to new victories. Therefore, "be it ours not to fight the battles of the past, but to live in unity, acknowledging one Lord and Master and every other man a brother."

Proceedings of Dental Societies.

VERMONT STATE DENTAL SOCIETY.

The twentieth annual meeting of the society was held in Montreal on the 18th, 19th and 20th of last month in the hospitable quarters of the Queen's Hotel, by special invitation of the dentists of the Province of Quebec. For several years visiting Quebecers to Vermont conventions were so generously entertained, socially and professionally, that they felt as if they had been permitted to open a sort of running account with no chance for repayment, and even when Brother Jonathan accepted the invitation to come into the arms of John Bull, junior, for a few days, the Canadians felt that Jonathan, rather than John, was the bestower of hospitality. The Queen's Hotel is new, first-class and convenient, and the manager, Mr. Fraser-Crierie, from start to finish, gave so much personal attention to the comforts of the visitors, that it seemed like a big family in a big home, with a big-hearted Pater. There was none of that chasing for tips, and small tricks of bleeding, characteristic of the management of some notable hotels. For the nonce the whole building was like a home.

On arrival of the train Wednesday evening, the visitors were in a few minutes in the Queen's, and after disposing of their luggage, four large sleighs, each holding about forty-five, were filled and were driven to the Athletic Club House, behind the mountain, where they arrived in time to witness the Montreal and La Montaguard Snow-shoe Clubs coming in on snow-shoes after the tramp over Mount Royal. The scene was unique and lively, the snow-shoers carrying Roman candles, whose colors gave a picturesqueness to the winter scene without any theatrical effort. The night was not too cold, and the boys were in jolly trim. The rooms were decorated with the Union Jack and the Stars and Stripes. An informal supper was then given the guests, and the Montreal and La Montaguard, turn about, sang some of the club songs and solos. Afterwards they removed to the large ball-room, where songs, dances, tugs-of-war, and lots of snow-shoers' fun, in which the guests participated, occupied two hours. The singing of La Montaguard Club was extremely beautiful, and as the Montrealers said, "We are nowhere with our French brothers when the singing begins." The snow-shoers gave Dr. Blanchard, Dr. Young and several of the heavy-weights the distinguished honor of "the bounce." Dr. Young thought he was going up all the way to the North Pole. After singing "Hail Columbia" and "God Save the Queen," the sleighs were filled again, and by twelve o'clock everybody was as snug as a bug in a rug in the cosy rooms of the Queen's.

THE VISITORS.

Besides the Quebec Province dentists, who reside outside of Montreal, there were present: W. H. Milliken, Boston; G. T. Phillips, J. G. W. Germond, Rutland; Chas. H. Clute, N.Y.; G. L. Curtis and wife, N.Y.; John Sherman, Hawkesbury; F. W. Van Nortwich, N.Y.; G. J. Buttman, M. J. Downs, N.Y.; H. D. Hickok, Malone, N.Y.; H. F. Cummings, Augusta, Me.; C. H. Wells, Huntingdon; Dr. Blanchard and wife, Dr. and Miss Turrell, Dr. Mound and wife, Rutland; Dr. Robinson and wife, Morrisville; Dr. Wright and wife, Dr., Mrs. and Miss Lewis, Dr. Wait and wife, F. P. Mather, Brandon; Dr. Taggart and wife, Dr. S. H. Hodge, Dr. Ellis and wife, Dr. Wheeler, Burlington; Dr. Parker and wife, Bellows Falls; J. M. Clarke, Burlington; Dr. C. S. Campbell and wife, St. Albans; Dr. J. H. Collins and wife, Granville, N.Y.; Mrs. R. T. Covey, Pueblo, Col.; W. S. Curtis, Randolph; A. O. Minott, W. H. Munsell, Wells River, O. L. Woodworth, Verginnix; A. R. Bell, Ewensburg Falls; F. P. Mather, Chester; F. S. Bellyea and wife, Brookline, Mass.; Annie L. DuBois, Randolph; F. G. McGovern, Verginnix; C. H. Garresh, wife and daughter, Exeter, N.H.; K. L. Cleaves, Montpelier; A. H. Ward, Lcomestes, Mass.; Geo. F. Cheney, St. Johnsbury; P. M. Chase, Bethel; F. F. Fisher, W. R. Blackstone, Manchester; G. A. Bowers, A. J. Sawyer, Nashua, N.H.; Miss Dr. Bosworth, Rutland.

THE OFFICERS

were: President, Dr. E. O. Blanchard; 1st Vice-President, Dr. F. P. Mather; 2nd Vice-President, Dr. C. S. Campbell; Secretary, Dr. T. Mound; Treasurer, Dr. W. H. Munsell; Executive Committee, Drs. J. A. Robinson, K. L. Cleaves, H. Turrill. Dr. T. Mound has had over thirteen years of official life in the Society, and what he does not know about the office he holds is not worth knowing. Dr. Robinson had an immense amount of detailed work to conduct, and did it to the satisfaction of everybody. The absence of Dr. G. W. Hoffman, the State Prosecutor, was much regretted.

THE OPENING SESSION.

The meeting was called to order at 9 o'clock, when the Rev. Dean Carmichael gave the prayer. Dr. S. Globensky, President of the Dental Association Province of Quebec, then delivered the following address of welcome:

To the President and members of the Vermont and New Hampshire State Dental Societies:

LADIES AND GENTLEMEN,—As President of the Dental Association of the Province of Quebec, it gives me extreme pleasure to welcome you to our historic city—the metropolis of the Dominion. Realizing the measure of sacrifice which your kindly acceptance of

our invitation must have caused you, we appreciate the more fully your visit, as a social, professional, and I may say, as an international kindness. We have so often been under professional obligations to you, that, remembering the conventions held in Burlington, White River Junction and Brandon, we feel we owe you a debt we are unable to repay. However, we do not believe that you will regret your visit to Montreal. In many respects we have common interests and common history. Upon this spot in 1642, the Sieur de Maisonneuve laid the foundation of Ville-Marie de Montreal; but in 1535, when Jacques Cartier came here, he found a large Indian town existing on the present site of our city, not more than a few hundred yards from where you are now in session, and the name of which, Hochelaga, is still perpetuated in our limits. Montreal, from its earliest history, has been a city of romance; but as you know, to-day it is the commercial metropolis of Canada. From the banks of the St. Lawrence, expeditions proceeded to retaliate upon the colonies to the south, which now constitute your States. The war-whoop of the Indian and the assault of French and English forces marked that era. We have passed from that period of conflict into a history of peace and mercantile prosperity. Vermont and New Hampshire have grown side by side with us, in political separation but in peaceful rivalry. You will find in our city evidences of the fraternity and unity of the two races. You will hear the two languages and witness manners and customs that may be foreign to you, but which in their variety add a charm and picturesqueness to the city of which we are proud. Ladies and gentlemen, it is our sincere wish that you will enjoy your visit, as we enjoy your presence; and that you will convey back such pleasant professional and social memories that you will often desire to come back. On behalf of the members of the Dental Association of the Province of Quebec—and I am sure I may add, on behalf of the good citizens—I thank you for holding this meeting in Montreal, and most cordially say, in my own language, *Bien-venu*; and in yours, Welcome.

Dr. F. P. Mather replied as follows:

MR. PRESIDENT, LADIES AND GENTLEMEN,—In reply to the kind and eloquent words of welcome conveyed to us in the address of the President of the Dental Association of the Province of Quebec, I will say that the Vermont State Dental Society came to Montreal to hold its twentieth annual meeting in response to the cordial invitation of the delegation of dentists from the St. Lawrence valley, present at the meeting of the Society in Brandon last year. They warmly pressed their invitation upon us, which we gladly accepted, as some of our most valued members are residents of this city and vicinity, and we have been almost from the first indebted to our Canadian friends for much of the success that has

attended our conventions, in both a professional and social way. We are pleased that we have come at a time when our hearts have been so recently touched by the gracious words of Her Majesty the Queen, to whom you are so loyal and whom we honor and respect, words that so quickly dispelled the little cloud that for a moment seemed to threaten the friendly relations existing between our countries. As has been said, there are many interests in common between the inhabitants of this province and our people in the way of business and commercial affairs; we are well joined by several important lines of railroad. Our picturesque lakes send their surplus waters to the sea by the great river that flows past your doors, the same by which the early explorer who gave our lake and State their names, found his way to the heart of the continent. The fame of this beautiful city has reached all our people, whether they have ever beheld it with their own eyes or not. We are aware of its metropolitan character, its great and growing commercial importance, the learning of its professional men, the activity of its religious orders, its great public works and celebrated universities, and we have looked forward with pleasure to this visit, expecting to get much good during our short stay by exchange of ideas with the members of our own profession, of this province so justly celebrated for learning and skill. In behalf of the Vermont State Dental Society and their friends here present, I wish to thank the Dental Association of the Province of Quebec, and all others in authority for the cordial welcome already received, and in advance for what may be in store for us.

After some routine business, Dr. E. O. Blanchard, President, gave the annual address, which will be found on the first page.

Dr. A. J. Parker, Bellows Falls, read a paper on "Local Anæsthetics," which was well discussed.

Dr. G. A. Young, Concord, N.H., believed that faith in the drug has often more effect than the action of the drug itself. "I hate to have to say it," he said, "but cocain is all in my eye. (Laughter.) My name is George, and I can't help it. (Laughter.) If you put some water in a bottle and label it cocain, and pretend to inject a little of it into the gum it will have as much effect as the real article. It makes no difference whatever what you have in the bottle. You may call it hypnotism, or what you will, but the fact of the matter is that you can use what you like and the same results are secured. I take no stock in local anæsthetics, but if you must use them, let them be salt and water; or, better still, pure water." (Laughter.)

Dr. Wait, of Boston, described the uncertainty of cocain as a local anæsthetic, and the undoubted risks which must be run in its employment. He has given up gas because he could never attain certainty with it. Sometimes a certain amount would hold the

patient through the longest operation; again, in the case of another patient it would scarcely have any effect. There was a difference, too, in the effects of cocain, which was undoubtedly a heart paralyzer, and in the employment of which he had more than once trembled for the results. He had found, however, that whiskey taken internally, or by injection, had a rallying effect, and he could recall more than one case in which if he had not tried this, the patient must have died. Hypnotism in dentistry he described as "poppycock." He was now using electricity as an obtunding agent in the form of cataphoresis, and he was hopeful of being able to perfect the apparatus which he employed in its use.

Dr. W. George Beers deprecated the idea that it should go abroad that dentistry was such a serious business as to require powerful anæsthetics. This was hurtful to the profession, and it conveyed a wrong idea to the public mind. He did not know how it was with Americans, but he could speak for Canadians, and say that they found no such extreme necessity for the use of anæsthetics as had been suggested in the discussion. Perhaps the Canadians were denser and therefore less susceptible to pain—(laughter)—but he knew in his own practice he did not need, in the great majority of cases, to use either a local or a general anæsthetic. To be sure, there were serious cases in which it was necessary to produce anæsthesia, but the percentage was small. The every-hour business of filling teeth for everybody was being magnified far beyond reasonable limits, as of such intensity that resort must be had to some obtundent, as if a tumor or an extremity was to be amputated. We should welcome and investigate all pain-destroying suggestions, but a great deal of mischief was done by magnifying the terrors of operative dentistry. The treatment referred to by Dr. Wait was under trial in Montreal by two or three practitioners.

Dr. Lewis, of Burlington, believed in ether, but he always gave ether with air, just as you should take alcohol with plenty of water. If you took alcohol straight you might expect unhappy results; if you took it with water, it made you happy. (Laughter.) So with ether. Let it be given with air, and you simply had the loss of sensation, which was what you desired most.

Dr. G. Lenox Curtis, of New York, described his experience with cocain, some of which were gruesome enough. He ascribed the grey hairs in his head to the narrow escapes of some of his patients through its use. In some cases what would be just right for one would bring another to death's door almost. He had found it safe to precede the use of cocain by giving the patient the homœopathic drug gelsemium, ten drops of which dissolved in four ounces of water might be administered to the extent of one teaspoonful, or two at the utmost, before using the cocain or other

anæsthetic. Cocain was a poison; it was also a heart paralyzer, and it should be used with caution. Its character and effects should be studied, and there should be an intimate knowledge of its use before it was employed.

A demonstration of cataphoresis, for the purpose of obtunding sensitive dentine, was given by Dr. Gentles, the apparatus employed being an eight-cell battery of the Julien type (with a maximum discharge of sixteen volts), and an eight-point switch-board to add one cell at a time. The rheostat was a Willms dry current controller (maximum resistance of 100,000 ohms, min. .001 ohms), a volt and milliampere meter.

Patient, G. W. Oliver, L.D.S.; cavity, right lower second molar, coronal cavity very sensitive. Rubber dam adjusted, and a solution of cocain, grs. vi., guaiacol, ℥i., as recommended by Professor Morton, was applied. The current from four cells was turned on and raised to two volts, and one-fifth of a milliampere reached. Patient indicated feeling it; after five minutes the current was raised to three volts—no appreciable difference on milliampere meter. This was continued for eleven minutes, when the current was turned off, the cavity was tested, but still found slightly sensitive. Another application of 30 per cent. solution of cocain was applied for six minutes, and a pressure of nine volts was reached at one milliampere quantity. When the current was turned off, the cavity was found practically devoid of sensation, and was prepared by one of the visitors, who declared himself satisfied with the result.

THE CLINICS

As usual were very interesting: Dr. Belyea, of Brookline, Mass., "Practical Crown and Bridge Work"; Dr. G. A. Young, Concord, N.H., "Method of Restoring Broken-down Front Teeth by use of Gold Facings"; Dr. J. E. Waitt, Boston, Mass., "Aseptic Atomizer, Flexible Nerve Brooches, etc."; Dr. G. A. Bowers, Nashua, N.H., "Method of Procuring an Absolutely Correct Bite in Bridge Work, Contouring with Gold, using the Mechanical Mallet"; Dr. C. H. Gerrish, Exeter, N.H., "Plastic Filling, without the Rubber Dam"; Dr. W. R. Blackstone, Manchester, N.H., "Operations with Mechanical Mallet"; Dr. G. Lenox Curtis, New York, "Oral and Facial Diseases." It would be quite impossible to do justice here to the interest shown in these clinics, and it will not be deemed invidious to refer specially to the skilful operations performed by Dr. Curtis, without in any way disfiguring the face.

Dr. G. Lenox Curtis' clinics proved highly interesting and eminently successful. Out of one dozen cases presented, he operated upon six of them. Among those for consultation, three were of nasal stenosis, in which one side of the nares was so completely closed by tumors and deflection of the septum that breathing

through the nose was well-nigh impossible. This he claimed a cause for deafness in the ear of the affected side, as was clearly demonstrated in these cases, in consequence of catarrhal inflammation. He also said that the disagreeable habit of snoring is acquired from similar closures of the nostril. He also suggested, the only method of correcting these evils was in removing all abnormal growths, straightening the septum, and local, stimulating treatment within the nares. This is, he claims, the means of correcting that most distressing complication of hay fever and asthma. Particular stress is laid upon the fact that until the nasal breathing is established, mouth-breathing will continue.

Dr. Curtis said he could best serve the dentists by giving them a practical demonstration of how to treat alveolar abscess. He soon found a willing patient among those present.

Allow me first to show you how to find the affected tooth. With this heavy steel instrument (one the size of an ordinary plugger) percuss the teeth as you now observe me doing. Get the resonant tone as you find in the healthy teeth, and continue around the arch until an abnormal sound is detected. When the diseased organ is reached, as is here clearly demonstrated, the tone is dull, and as I have named it, leaden, as if the instrument came in contact with a yielding substance. You will get a similar tone to this in cases of pericemental inflammation. While the enamel is usually discolored in these cases, this and the list of hot and cold applications to the tooth is not always reliable in ascertaining its vitality.

Here we find the pulp of the left central incisor devitalized, and the tooth abscessed; the fistulous opening in the gum directly over the lateral incisor. This is not an uncommon occurrence, for we frequently find the fistulous opening far away from the source of trouble. In such cases I advise the alvatomomy to take place directly over the apex of the root. The fistula will usually cure and heal of itself after it has been thoroughly cleansed and carbolic acid forced through it, or even the burr or curette. First, I will open into the pulp chamber from the palatal surface, making the opening large enough to allow free access to the canal, which as you see I seam out with the Gates Gliddell drills, of various sizes, until I am positive of having reached the apex.

Thoroughly cleaning and sterilizing the canal and drying it with the Darby points, which are the best and most satisfactory for perfectly drying the canal, again sterilizing it by the hot-air blast until as you see the patient is in pain from the intense heat it causes, we have the dentine dry, and it will receive the chloroform like a blotting paper, which, by its capillary attraction, draws the fluid to the apex and into the open canaliculi. The chloroform is best introduced into the canal by means of a hypo-

dermic syringe. The gutta percha canal points I now place into the canal, and the chloroform immediately attacks them and forms a chloro-percha, which I believe forms a more perfect canal filling than any other material. The canal is now packed solidly with gutta percha, and at some future time, the cavity covered with gold.

I will now open through the gum and alveolar process to apex of root with this spear-pointed drill, first, as you see, injecting cocain into the gum through which I am to operate. I now, with this rose-head burr, pass it beyond the apex into a cavity in the alveolar process made by the abscess, which is as large as an ordinary white bean, burr away the sac and freshen the edges of the bone, and with this curette scrape out the debris and follow this by thoroughly syringing the cavity with peroxide of hydrogen, hoping to boil out all remaining fragments. Now, to render the part in as normal condition as possible, I force into cavity a hot 1 per cent. solution of chloride of sodium. The after-treatment consists of keeping the face frequently in ice-water to prevent the accumulation of pus and the face swelling.

Should any purulent discharge come from the wound within the following day or two, it should be syringed out within the cavity as before, and inject two or three drops of pure tincture of iodine into cavity and leave there. This repeated, if necessary, every two or three days should be sufficient to effect a cure. Over-treatment in these cases is too often cause of failure.

Abscess of Antrum.—This patient, Mrs. S——, aged 48, who, as you see, is in feeble health, quite emaciated, and shows marked signs of long suffering, gives the following history: Suffered for three years with severe neuralgia in head, especially right side. In May, 1895, right superior third molar root extracted, wound did not heal completely. Saw Mrs. S. first time in October, 1895. Small discharge of pus from socket of the tooth. On probing felt some rotten bone, and suspected a broken tuberosity. On opening the mucous membrane over the tuberosity, found no sequestrum or broken bone, and could feel no root of the wisdom tooth. Sent the patient away with instructions to report again in a month if the discharge continued. Heard no more from her until the beginning of present month, when she wrote saying that the discharge had not quite disappeared.

I am asked to examine her mouth and ascertain whether the right superior maxillary is diseased at the condyle. The mucous membrane, beginning at the line where the second molar was and extending back over the condyle and for about an inch along the cheek, is considerably inflamed. Likewise we find an inflamed spot at the distal edge of the hard palate. These in themselves are of little significance, for we have all seen similar conditions

from undue pressure of the plate as here shown by the ridge in the mucous membrane. These spots to me, however, indicate a deeper seated trouble, one of which having been at no distant time ulcerated in consequence of necrosed bone. I find here upon the margin of the gum a drop of straw-colored fluid, which has oozed from an opening in the vicinity of where the root had been extracted. This color of fluid is pathognomonic of necrosis of bone. Here you see, with this delicate probe, I have finally been able, but with difficulty, to find the opening which leads into the antrum. Upon the removal of the probe I am unable to get the characteristic odor which is usually peculiar to the diseases of the antrum. From the history of the case, and from the inflammation described, I am convinced that we have here an obstinate disease of the antrum of long standing, due no doubt to the abscessed teeth and possibly also to the root, which was recently extracted. I hear someone say the history of the case and the present signs are not sufficient to warrant a diagnosis of virulent antrum disease. I will therefore before operating try to satisfy you on this point, and show you how to clearly diagnose such a condition. In this syringe, which has a very delicate point, is half an ounce of pure oxide of hydrogen. I will inject this into the antrum through this opening in the jaw. If there is nothing more than mucus or slight inflammation of the antrum, the effervescence which will pass out through the nose will be slight in amount and light in color. The gravity of the disease will therefore be indicated by the amount and character of the discharge. Now you see what a great quantity of black, green and offensive discharge there is, so nauseating that the windows must be raised and some of you obliged to leave the room. From the expression of your faces I conclude this diagnosis is very satisfactory to you, and you hear the patient declare she already experiences a sense of relief from the pressure heretofore. The patient being so adverse to taking ether we will employ a 4 per cent. solution of cocain, injecting it freely into the gum around which we will operate and into the antrum. I have used in all twenty minims; first, as you see, having administered to the patient an ounce of whiskey to counteract the depressing influence of cocain, and to improve the already feeble pulse which doubtless is largely due to pyæmia from which she had been suffering for a long time. I expect to make this operation painless by this injection. As you see, I have made a lineal incision extending from the location of the second molar back to the condyle of the jaw. Cutting clean through the periosteum and the dead bone underlying it, the rough edges of which my knife grated upon, with my probe I am enabled to outline a large area of necrosed bone which involves the distal half of the floor and nearly the entire posterior wall of the antrum. In

removing this, you see the gushing forth of thick, black, granular, offensive pus. With this curette I am now able to scoop out the contents of the antrum, which is filled with granulations and pus—fully three ounces. This deluge of blood which follows their removal shows the long engorged state of the blood vessels. At present we will make no effort to check it. I have now thoroughly scraped out all the necrosed tissue, and by the aid of peroxide of hydrogen and hot water have cleaned out all the debris and checked the hæmorrhage. We will now sterilize the cavity with a strong solution of bichloride of mercury (acidulated), dry it, sifting in a liberal quantity of aristol, and pack it firmly with bichloride gauze for the purpose of preventing secondary hæmorrhage and keeping as near as possible an aseptic condition.

As you have observed and as the patient has stated, she has realized little or no pain during the operation. She will now have a milk punch and be taken to her home; sulphate magnesia later in case of fever; drop-doses of tincture of aconite every half-hour until patient perspires freely; milk punches every two hours; and ice-cold applications to the face to reduce inflammation and prevent suppuration; also mouth bath of phenol-sodique. The patient passed a comfortable night, having but one degree of temperature; the following morning enjoyed broth and gruel, but remained in bed during the day. The face was but slightly swollen, and she presented an altogether favorable condition. Forty-eight hours after the operation I removed packing which was blood-stained, dry and free from pus. I douched the antrum with peroxide of hydrogen-bichloride solution, and packed as before, but loosely, and left her in care of her surgeon, Dr. Stephens.

The next case to report for operation is extraction of root of tooth under cocain. This root, which you see well imbedded in the gum, is doubtless abscessed, and although quite firmly attached I will try to demonstrate the simplicity of this instrument in the extraction of roots.

I have injected freely a 4 per cent. solution of cocain into the gum on the buccal and lingual side of root. The principal object of using the elevator is to avoid destruction of the hard and soft tissues surrounding the tooth, which is usually the case when forceps is used, the result of which is too often extensive inflammation and necrosis.

As you observe I pass this delicate instrument down along the side of the root until the firm alveolus is found; with the other hand I get a firm hold of the patient's jaw, steadying the head against my chest with my arm. I then lower the handle of the elevator, which I firmly grasp in my right hand one or two degrees below the horizontal line. With a firm and quick upper thrust of

the instrument, whose point is slightly imbedded in the root, I elevate it from its socket with scarcely a break in the continuity of the soft tissue. This, as the patient tells you, was painless, as the blood is already coagulated in the socket, which is nature's and the most fitting dressing to exclude air and disease. It will, I believe, heal with the slightest amount, if any inflammation.

This patient complains of loss of speech. This comes from a variety of causes. The most frequent is due, perhaps, to inflammation of the vocal cords. The history of this case is, that for nearly a year, and without any apparent or acute cause, the patient has been gradually losing the use of his voice. His physician placed him upon iodide of potassium treatment with apparent improvement for a short time. He did not bear this treatment well, and it was discontinued. Examination reveals an intense inflammation of vocal cords and all adjacent tissue. There is also considerable hypertrophy of these tissues. The vocal cords themselves are irregularly enlarged, likewise irregular in their action, the left being almost paralyzed. Pharynx highly inflamed, the tonsils normal, but the uvula extremely long and large, and dangles down at the base of the tongue. You will also notice that from the posterior nares large quantities of stringy mucus cover the posterior wall of the pharynx. This condition indicates nasal obstruction, and in order to check it the abnormal growths in the nose must be removed. It is my belief that tuberculosis is always preceded by nasal catarrhal inflammation, and until this is corrected a cure cannot be accomplished. The throat condition, as here presented, much resembles that of tuberculosis, but let us hope to find another cause that is more amenable to treatment. Examination of the nose bears out my statement and shows clearly the cause of the excessive catarrhal discharge. The right nasal passage is nearly obstructed in consequence of hypertrophy of the inferior turbinate, and a large spur on the septum which extends out into the nares fully one quarter of an inch, until it joins the turbinate. This extends back nearly two inches into the nares. On the left side there is a large posterior spur on the septum, and an unusually large turbinate as seen on the side just described. All we can do for him this afternoon is to perform uvulotomy, and to remove the anterior nasal spur. As you see I have removed two-thirds of the uvula. By this we hope to prevent such a flow of mucus into the larynx, and lessening of the irritating cough that has been so annoying to the patient. We will cocaineize, and with this saw remove the spur which will greatly increase breathing area. You will now observe how increased breathing is established, and how quickly, by the use of peroxide of hydrogen, the hæmorrhage has ceased, but lest it should recur during the night, I will tightly pack it with

antiseptic gauze which may be removed the day following, and by frequent spraying with some of the cleansing solutions the mucous membranes will soon be found covering the exposed bone. A similar spray or gargle will be all that is required for healing of the uvula. I advise this patient to place himself under the care of a nose and throat specialist.

THE BANQUET

Was a decided success in every particular, owing to the whole-souled heartiness among the Quebec entertainers. The officials of the Board, the College, the students vied with each other to give the guests a rousing reception in true Canadian style, and with all respects to grand old Ontario, no province can excel Quebec in this way, when the French and English pull together, as they always do, at least, in dental organization. Two hundred sat down to a splendid menu in the beautifully decorated dining-room of the "Queen's," which was fraternally hung with the Union Jack and the Stars and Stripes. The menu cards displayed the flags of the two nations crossed, and under them the motto, "May they ever be united." The attendance was simply perfect, and the menu a credit to the management and the *chef*. As the party entered the room the orchestra played "Hail Columbia," as a compliment to the Vermonters. Dr. Beers occupied the chair, having on his right Dr. and Mrs. Blanchard, Dr. Brewster, Dr. G. Lenox Curtis and Mrs. Curtis, and others; on the left, Dr. S. Globensky, Deputy Surgeon-General F. Wayland Campbell (Dean of the Medical Faculty of the University of Bishop's College), Dr. T. Mound and Mrs. Mound. Dr. F. A. Stevenson, Dr. J. H. Bourdon and Dr. Maillette occupied the vice-chairs, and the students of the College were present, and presided over by Mr. T. Morrison.

After enjoying the racy things which Mr. Frazer-Crierie had so lavishly provided, the chairman called the first toast, that of "The Queen," remarking that Her Majesty, who is about entering upon the sixtieth year of her reign, had won the respect even of those who are not her subjects, because of her purity of life and nobility of character. She has witnessed the birth and death of empires, the rise and the fall of sovereigns and premiers and leaders, while her own empire has extended in almost every part of the civilized and uncivilized world, until, as it has been said, nearly every fourth person on earth owes to her allegiance, directly or indirectly. The chairman said that he was sure Brother Jonathan, representing a nation distinguished for its respect for women, would join their Canadian brothers in drinking the health of Queen Victoria as one of the best and wisest of women, whose social and sovereign influence had always been exerted in the interests of purity in court and home, and peace on earth and good-will to mankind. "The Queen! God bless her!" Drunk with cheers.

In proposing the toast to "The President of the United States," the chairman referred to the occasional family squabbles which occurred between John and Jonathan. No well-regulated family seemed to be able to keep house without these little spats. As Canadians, we were uncompromisingly loyal to our Imperial tie, and as an important outpost of that Empire, felt it our duty, come weal, come woe, to stand by the old country, even though we Canadians should be the chief sufferers. We are more proud than afraid of our numerically weak position, as we mean to do our duty, and that is all that is expected of us. But none more than Canadians wish, that the cursed *canaille* of press and people, who love to foment ill-will between the two great nations, could be exterminated. When Mr. Cleveland issued his manifesto a few months ago, it would not have been possible to propose this toast, or to display at our banquets the Stars and Stripes, but to-day wise and calm councils had prevailed and we understood each other better. The chairman proposed the toast of the President not as the nominee of his party, but as the representative of the sister nation, with which we desire to be the truest of friends and the most reciprocal of neighbors. The toast was received with cheers.

The next toast, that of "The Armies and Navies of Great Britain and the United States," the chairman said, had been placed on the list advisedly, in order to emphasize the fraternal relations desired between Britain and her young son Jonathan. Everyone in the room could use their influence to remove prejudices and to give fair play. We can show our teeth to each other professionally, but we should cease to do it politically. We can even shed each other's blood in clinics, but it would be a crime against civilization to do it in the field of war. The chairman ended by paraphrasing the jingo song:

" We do not want to fight,
But by jingo, if we do,
We hope, dear Brother Jonathan,
'Twill never be with you."

The orchestra played "Hail Columbia" and "Rule Britannia," after which Deputy Surgeon-General Campbell replied for the former part of the toast. The Doctor had just come from duty, and was in military uniform, and the British red-coat was warmly applauded. He spoke eloquently of the growth of the navy especially, and the fact that Britain was determined always to have afloat a navy more than twice equal to that of any two other nations. He showed the necessity for this in the government of so wide-spread an empire, and of Britain's custom of getting justice for the humblest of her subjects. Lieutenant-Colonel Stevenson, who had commanded the Montreal Field Battery for over thirty years, supplemented Dr. Campbell's remarks by a witty speech,

which made everybody as happy as himself. He alluded to his marching under the British flag in 1858 through the streets of New York, at the head of his battery, in company with the celebrated 7th Regiment of New York, of whom there were some members present.

Mr. W. H. Towne, representative of the S. S. White Dental Co., responded as follows for the United States :

“With the most profound and unalloyed pleasure as a representative of the Vermont State Dental Society, and as an honored guest of the Dental Society of the Province of Quebec, I rise to respond to the toast, ‘Armies and Navies of Great Britain and the United States’—the first time, I am credibly informed, that this toast has been proposed in the British Empire. That in itself is a very significant fact, and our Canadian brothers have gone still further, for I observe on the menu card of this banquet a beautiful device, representing the intertwining of the Union Jack and the starry flag of my country in fraternal embrace; the Union Jack on the left in the ascendant, and the star-spangled banner in the same position on the right. Our hearts respond instantly to this generous symbolism of fair Canada, both English and Gallic, and we say, God grant that the armies and navies of Great Britain and the United States may never meet, only as brothers for the furtherance of the interests and civilization of mankind. We have had our family quarrels and have been quite successful in setting up independent housekeeping, but I am never weary of thinking how much our family life has been enriched by Magna Charta, by Cromwell, by the Elizabethan age of English literature. How much instruction and joy we have received from the English founts of poesy and learning! Shall I ever forget the sweet family life as portrayed by Addison and Steele in the *Spectator*, Sir Roger de Coverly and his intimates? How sweet the scent of English meadows, as we read Chaucer, Spencer, Wordsworth; how the depths of the human heart are revealed by Shelley, Keats, Byron, Tennyson and Shakespeare. Emerson and Carlisle shake hands across the sea in sympathetic vision. Herbert Spencer, Huxley, Darwin and others innumerable, have enriched us with their mental treasures. America has absorbed and assimilated all this heritage from the Mother Country, and stands fair and beautiful with her own short but eventful history; but still it is mother and daughter, and as we have been lovers and sharers in the mental and spiritual realm, shall we not much more stand together in the material plane, for the blessing of the world? Amidst the great armies and navies of the world there is another force constantly growing, which men call Altruism. Many manifestations of this force are seen in plans for the betterment of the masses and in national affairs. One of its words is arbitration. England and America gave great impetus to this

thought in the settlement of the Alabama claims. And the late Poet-laureate in imperial verse thought out 'The parliament of man, the federation of the world,' the fulfilled dream of all seers and poets, and the joyous time to which, let us hope, we are hastening. England and America, identical in speech, thought and liberty—may they also be one for the uplifting of the race."

The toast of "Our Guests" was received with loud cheers. The chairman referred to the many profitable and pleasant meetings the Canadians had attended in Vermont and elsewhere in the United States. Vermont had fulfilled to us the scriptural injunction of loving their neighbors as themselves, and for many years, whenever there was a dental convention the "Canucks" had not been forgotten. He felt that the Montreal heart was not half big enough to pay back the obligations they were under, and he suggested that if the politicians would only leave the settlement of some of their squabbles to the dentists, they would be operated upon painlessly and bloodlessly. He asked the Canadians to drink the toast with Highland honors, to which a ready response was made, every man standing with one foot on a chair and the other on the table, and giving the "hip! hip! hurrah!" three times, which means "Death to foes and devoted love to friends," Dr. Cleaves, of Montpelier, responded.

The toast of "Sister Professions, Law and Medicine" was proposed in an able speech by Dr. F. A. Stevenson; responded to by Mr. H. C. St. Pierre for law, and Dr. J. B. McConnell, Vice-Dean of Bishop's, for medicine.

MR. ST. PIERRE'S SPEECH.

MR. PRESIDENT, LADIES AND GENTLEMEN,—When, on hastily glancing over the menu card, I read the words, "The Armies and Navies of Great Britain and the United States," followed by these others, "Our Guests," I felt somewhat alarmed at the thought that if, perchance, through the indiscretion of some reporters, this information were allowed to leak out, some people abroad might be led to believe that the gentlemen by whose presence we are honored to-night, had been captured and taken prisoners at Montreal by some of our volunteers in order that they might be kept as hostages, pending the negotiations on the Venezuela question and the settlement of the proper application of the Monroe Doctrine.

This first impression, I must admit, was bad enough as you see; but when on looking further down I read in plain English, "The Sister Professions, Law and Medicine,"—"Good heaven!" thought I to myself, "what will their friends yonder think of their fate, when they find out that they have fallen into the hands of the law, or what is worse still, the medical profession!"

If at any moment since your arrival amongst us, ladies and gentlemen, you have been misled into suspecting our good intentions, the cheerfulness and conviviality of this gathering must by this time have dispelled every misgiving; and when you see the merry clerk of the weather himself join in the festival and give you as his contribution a good old genuine Canadian storm with its millions of bright starry flakes of snow and its immaculate mantle of white, no doubt should further be allowed to linger. You will therefore believe us, gentlemen, when we are extending to you a frank and sincere welcome.

In speaking as I have just done, I know that I have been the trumpet of the sentiments of every Canadian present.

Gentlemen, being here in my capacity as a lawyer, I feel that I would be wanting in my duty and forgetful of the venerable traditions of my profession if I did not attempt to pick up a quarrel with someone.

I hold, gentlemen, that the science of dentistry, good and useful as it may be in some respects, is a dangerous science, in this sense, at least, that it is subversive of Christianity. What is Christianity? It is the new law, that which has superseded and cast into the shade of oblivion the old Mosaic law. Any society, the fundamental principal of which is resting on the old antiquated Mosaic law, is therefore antagonistic to Christianity. Christianity was founded on abnegation and charity, the old Mosaic law on strict, blind, unrelenting justice. "Suffer in silence," says Christianity, "even the tooth-ache." "A tooth for a tooth," said Moses, "and don't suffer any longer than you can help it."

Now, is it not a well-known fact that through the hellish manipulations of modern science, not only is the old decayed tooth made to disappear, and this without pain, but a new one is artificially inserted in its place? Is not that the revival of the old absolute antiquated Mosaic law? Is this not "a tooth for a tooth," a new one for an old one? What answer you, gentlemen? I shall not say that out of your own mouth you stand confounded, but I do affirm, and that without fear of contradiction, that out of thousands of your patient's mouths the revival of this old doctrine is made manifest.

Now, is it not to be regretted that in this our fair Province of Quebec, wherein our people are so faithfully attached to the orthodox teaching of the Church, we should be threatened with this new schism, and should we not feel somewhat concerned at the sight of the new proselytes receiving from abroad such heavy reinforcements as those which we see amongst us to-night?

I shall enter into no further disquisition on this point, but will content myself with denouncing you to some of our ultra-clerical periodicals, and great will be my surprise if within a month they

do not succeed in building upon this some political issue which will relegate into insignificance even the mighty, all-absorbing topic, the Manitoba School question.

There is another point I mean to raise and discuss at once whilst I have a fair opportunity of doing so. I have often heard dentists speak of anæsthetics and boast of their operations performed without pain, as if these things were discoveries of the present day.

Gentlemen, I contest the claim ; I deny the assertion that these are the result of modern discoveries. Why, I saw those painless operations performed when I was but a mere urchin in the country village in which I was brought up. Permit me to give you a short description of how the operation was performed.

In my native place (I speak without intending any disparagement to the learned profession of dentistry) the acknowledged dentist of the locality, at least for all the children below ten years of age, was the village blacksmith, a good-humored, cheerful, strong-armed, brawny fellow, whose smith's shop was next to my mother's house. Methinks I still hear the joyful sound of his hammer falling in rhythmical cadences upon the anvil and waking me up in the early morn at the strains of its cheerful music.

When a boy's tooth had become shaky in its socket, upon the blacksmith devolved the task of pulling it out.

The operation, though rather primitive in its character, was effective and quite painless, as you will notice. One end of a strong piece of hempen thread was first tied around the doomed tooth, whilst the other end was securely fastened to the heavy, immovable vice close to the anvil. The boy was then told to stay perfectly quiet for a minute or two, as the tooth by some magic spell would soon fall out of itself. The good blacksmith had this fault in common with other more worthy members of the profession, that he frequently prevaricated, at least whilst acting in his capacity of dentist, and the old French proverb, "Menteur comme un arracheur de dents," was quite applicable to him.

Whilst his patient victim would remain standing, waiting for the mysterious action of the expected spell, the blacksmith would put in the fire a piece of iron, which he kept there until it had reached a white burning heat. Then grasping his heavy pinchers, he would pull it out and make a sudden swoop, with a wild scream, towards the innocent boy, who in his fright would dash away, leaving behind him the little tooth dangling from the thread. No pain was felt, no disagreeable impression was experienced other than the little fright, which soon gave way to a feeling of hearty merriment. The boy would soon return for the little tiny pearly tooth, which he would carry with a triumphant look to his mother.

Clever and efficient as this old style was, I am fain to admit,

however, that the so-called modern discoveries, if not superior to the old blacksmith's system, are at least equal to it and should not be despised for their being of more recent use.

Gentlemen, this shall be the end of my quarrel with you, and remembering that I belong to a profession the chief motto of which is "justice," I must admit that yours is indeed a useful profession. Through your knowledge of this important branch of the broader science of surgery, the singer, the speaker, the orator can depend upon having properly restored to him that important part of the mechanism of the voice. Your art helps to secure health and assists in preserving beauty.

Through the delicate operation of dentistry the stately matron loses nothing of the charms of her merry laugh, and the lips of the rosy-cheeked, blushing maiden preserve all that which is lovely and enticing in her bewitching smile.

Ladies and gentlemen, having nothing more to say, I now surrender you to the tender mercies of the medical profession.

Dr. McConnell spoke eloquently on the relations of medicine and dentistry.

Dr. Blanchard rose and proposed the toast to the "Dental Association of Quebec and the Dental College," as follows:

MR. CHAIRMAN, LADIES AND GENTLEMEN,—It is said in ancient Rome, in recognition of the attachment of two friends, Tiberius Cæsar and Sejanus, the Senate decreed that an altar should be built, personified as a goddess, and dedicated to Friendship. Of all the altars which were placed on the sacred floor of the Parthenon, I think this must have been the object of the most beautiful offerings and most fervent prayers. Although it is ages since that altar passed away in ruin, the thought there personified remains with us still. Let us rear another altar this evening and dedicate it to Friendship. Let us raise it high above the altars of Education, Science, Wealth and Fame, and having draped about it the mingled folds of the Union Jack and the Stars and Stripes, place two wreaths thereon, emblematic of the Dental Association of the Province of Quebec, and the other, the Dental Society of the State of Vermont. And while we thus bring our offerings to this ideal altar, and bow in reverent admiration before the beautiful goddess of Friendship, I would propose as a fitting toast, "The Dental Association and Dental College of the Province of Quebec. May they ever fill the hearts of their countrymen and their teeth also."

Dr. Globensky on behalf of the Association replied as follows:

The pleasure of responding to the toast of the "Dental Association and the Dental College of the Province of Quebec" is two-fold, because it affords me the occasion of speaking of two institutions dear to my heart, and to whose creation and success it has

been my pride to contribute in the humble measure of my means and power.

The Dental Association of this province, founded in 1869, has had to fight many battles and to contend with great difficulties before reaching the lofty spheres of prosperity and importance from which it now looks down on those who were aiming at its destruction. But now, thanks to the better portion of the members of our profession and of the public, the Dental Association is counted among the best and most useful institutions of this province.

Its existence having been secured by our Legislature, it is now a legally constituted body enjoying all the benefit of special laws which protect the dental profession and the public against the unscrupulous quacks and charlatans by whom one of the most useful branches of human knowledge, the art of dentistry, has for a long time been degraded.

By the efforts and devotion of such eminent members of our profession as you see this evening, it is now an honor to be a registered dentist of this province; and it is due to the importance of the Dental Association of this province that the Dental Society of the State of Vermont is here this evening drinking before the "beautiful goddess of Friendship" to the health of the Dental Association of the Province of Quebec.

Closely related to this last institution is the Dental College of the Province of Quebec.

Though of recent creation this new institution has already taken a prominent place in this province, so much so that one of the greatest universities of Canada, Bishop's College, of Lennoxville, has accepted a demand of affiliation made by our college. And now the Dental College of the Province of Quebec is affiliated with that powerful university which has done so much for the advancement of science in this country.

The gentleman who has so eloquently and in so poetic language proposed the toast to which I am now responding, spoke of two great men of Rome, Tiberius and Sejanus, whose friendship had caused the Senate to decree the building of an altar. As the strongest ties are not always unbreakable, it happened that Tiberius and Sejanus did not always remain good friends, and history tells us that Sejanus was strangled by the order of Tiberius, whose favorite he had been. May such a fate never be that of the Dental Association and of the Dental College of the Province of Quebec. Let us hope that they will always, as in the past, live in the sweet bonds of friendship. Let us hope, too, that they will never forget the bonds of friendship which unite them to the Dental Society of the State of Vermont.

Dr. F. A. Stevenson, Secretary of the College, replied briefly.

Dr. Chas. Brewster, who may justly be called the father of dental legislation in Canada, proposed in a very neat speech the toast of "The Dental Profession," which was responded to by Dr. G. Lenox Curtis, and Dr. Jas. Lewis, the latter being probably the dentist longest in practice between Montreal and New York, and having a valuable mental storehouse of professional reminiscences. Dr. G. Maillette gave one of his eloquent speeches in French. Dr. Springle gave "The Ladies" with the modesty of a bachelor, and Dr. Andres, "The Press." Dr. Parker, of Bellows Falls, proposed a volunteer toast, which caught the sympathy of the entire meeting. It was a vote of thanks to the management of the Queen's Hotel, and especially to Mr. Frazer-Crierie, for the home-like hospitality and comfort which they had enjoyed. It was carried with loud cheers. After singing "Auld Lang Syne" in English and French, "My Country 'tis of thee" and "God Save the Queen," the meeting adjourned, "happy to meet, sorry to part, hoping to meet again."

We must not overlook the credit due the students of the Dental College of the Province of Quebec, who managed to intersperse between the toasts some very charming choruses.

It was "the wee sma' hours ayont the twal" before anyone got to bed, and Friday morning session found many still in the arms of Morpheus. Some routine business having been disposed of, Miss Grace Bosworth was admitted to membership. Miss Bosworth has been for several years assistant to Dr. Mound, and has been present at many of the meetings, and is the first lady dentist to enter the ranks of the Vermont Society. Dr. C. H. Gerrish read a paper on the "Good of the Order," Dr. Andres, on "A New Therapeutical Remedy," Dr. B. S. Stackhouse, on "How shall we let the Public Know?"

When the train left, there were good-byes exchanged. The guests seemed sorry to go. The "Canucks" were certainly sorry to let them go. Many invitations were extended the Vermonters during their stay. His worship the Mayor was obliged to absent himself from the banquet on account of recent bereavement, and Dr. Anderson, the American Consul, on account of illness. His Excellency the Governor-General, Lord Aberdeen, invited the whole company to a skating party at Ottawa, but the heavy snow-storm, which proved to be one of the worst in twelve years, blocked the roads and made it impossible.

When the train arrived at St. Alban's, the members of the Society were called to order in the car, and the following elections made: President, Dr. F. P. Mathers, Chester; 1st Vice-President, Dr. C. S. Campbell, St. Alban's; 2nd Vice-President, Dr. J. A. Robinson, Morrisville; Secretary, Dr. T. Mound; Corresponding Secretary, Dr. Grace Bosworth, Rutland; Treasurer, Dr. W. H.

Munsall, Wells River. Executive Committee, Drs. K. L. Cleaves, Montpelier; H. Turrell, Rutland; C. W. Steele, G. W. Hoffman, state prosecutor, White River Junction. Next place of meeting, Montpelier, third Wednesday, Thursday and Friday of March, 1897.

Question Drawer.

Address all correspondence connected with this Department to DR. R. E. SPARKS, Kingston, Ont., Can. Matter for publication should be in the hands of the Editor not later than the 10th of each month, and must have the writers' names attached, not necessarily for publication, but as a guarantee of good faith.

24. Q. What is *Leptothrix buccalis*?

(a) *Leptothrix buccalis* was a name given by Robin, in 1847, for those organisms in the human mouth which had been observed up to that time. The term, however, is rapidly becoming obsolete, owing to the fact that these forms are being more thoroughly classified and named accordingly. Miller says: "The name *Leptothrix buccalis* designates particular organism possessing peculiar characteristics, and the name deserves to be retained as little as 'denticola micro-organisms of human mouth.' (Page 70.) Leiber & Rothenstein attribute the cheesy, whitish substance formed on the teeth in the interspaces to the presence of *Leptothrix buccalis*. Any of your readers who wish a fuller account of this term, can find references in Miller's work above quoted (page 70); also in Leiber & Rothenstein's *Dental Caries* (page 23 of Chandler's translation); *American System of Dentistry* (Vol. 1., page 751)." W. A. ROBERTSON, Crookston, Minn., U.S.

(b) "A genus of bacteria' found in the 'oral cavity,' also under the skin." J. H. STOWELL-JONES, Nova Scotia.

QUESTIONS.

27. Q. Has the moon's phases any influence upon animal tissue? Would the fit of a set of artificial teeth be in any way affected by such influence?

[We have not yet received an answer to the very interesting question No. 25. We are promised one, however, which we expect will be interesting. We will publish it as soon as we receive it.—ED. Q. D.]

EDITORIAL NOTE.

Many valuable papers and other matter have been held over until May issue, in order to present a full report of proceedings of Vermont State Dental Association meeting.